Case 08-23559 Doc 1 Filed 09/05/08 Entered 09/05/08 15:27:33 Desc Main B1 (Official Form 1) (1/08) Document Page 1 of 47

	ates Bankruptcy C rn District of Illino			Volu	intary Petition
Name of Debtor (if individual, enter Last, First, Mic Herrera, Florinda Monica	ldle):	Name of Joint Deb	tor (Spouse) (Last, First,	, Middle):	
All Other Names used by the Debtor in the last 8 ye (include married, maiden, and trade names): Monica Herrera	ars		sed by the Joint Debtor in aiden, and trade names	-	years
Last four digits of Soc. Sec. or Individual-Taxpayer EIN (if more than one, state all): 2643	I.D. (ITIN) No./Complete	Last four digits of S EIN (if more than o	Soc. Sec. or Individual-Tone, state all):	axpayer I.D.	. (ITIN) No./Complete
Street Address of Debtor (No. & Street, City, State 1250 S. Indiana Street, Unit 1308 Chicago, IL	& Zip Code):	Street Address of Jo	oint Debtor (No. & Stree	et, City, State	e & Zip Code):
Cilicago, IE	ZIPCODE 60605			Z	IPCODE
County of Residence or of the Principal Place of Bu Cook	siness:	County of Residence	ce or of the Principal Pla	ace of Busine	ess:
Mailing Address of Debtor (if different from street a	address)	Mailing Address of	Joint Debtor (if differer	nt from stree	t address):
	ZIPCODE	1		Z	TIPCODE
Location of Principal Assets of Business Debtor (if	different from street address a	bove):			
			,	Z	IPCODE
Type of Debtor (Form of Organization) (Check one box.) ✓ Individual (includes Joint Debtors) See Exhibit D on page 2 of this form. □ Corporation (includes LLC and LLP) □ Partnership □ Other (If debtor is not one of the above entities, check this box and state type of entity below.) Filing Fee (Check one be attached □ Filing Fee to be paid in installments (Applicable of attach signed application for the court's consideration is unable to pay fee except in installments. Rule I 3A. □ Filing Fee waiver requested (Applicable to chapter attach signed application for the court's consideration is unable to chapter attach signed application for the court's consideration for the court's consid	o individuals only). Must tion certifying that the debtor 006(b). See Official Form er 7 individuals only). Must	te box.) Interest as defined in 11 Interest as	the Petition The Petition Chapter 7 Chapter 9 Chapter 11 Chapter 12 Chapter 13 Debts are primaril debts, defined in 1 \$ 101(8) as "incur individual primaril personal, family, o hold purpose." Chapter 11 Is business debtor as definant business debtor	n is Filed (C Chapi Recog Main Chapi Recog Monn Chapi Recog Nonn Nature of E (Check one ly consumer 1 U.S.C. red by an ly for a or house- Debtors Debtors Debtors Check one lated debts over the lated debts	box.) Debts are primarily business debts. S.C. § 101(51D). 1 U.S.C. § 101(51D).
Statistical/Administrative Information Debtor estimates that funds will be available for Debtor estimates that, after any exempt property distribution to unsecured creditors.			will be no funds availab	le for	THIS SPACE IS FOR COURT USE ONLY
Estimated Number of Creditors]	- 50,001- 100,000	Over 100,000	
Estimated Assets	000,001 to \$10,000,001 \$2 0 million to \$50 million \$	50,000,001 to \$100,00 to \$500	00,001 \$500,000,001 0 million to \$1 billion	More than \$1 billion	
Estimated Liabilities		50,000,001 to \$100,00	00,001 \$500,000,001 0 million to \$1 billion	More than \$1 billion	

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	ntary Petition	Name of Debtor(s):	
	page must be completed and filed in every case)	Herrera, Florinda Monica	
	Prior Bankruptcy Case Filed Within Last 8	Years (If more than two, attach	additional sheet)
Location Where	Filed: None	Case Number:	Date Filed:
Locatio Where		Case Number:	Date Filed:
Per	nding Bankruptcy Case Filed by any Spouse, Partner or	Affiliate of this Debtor (If mo	re than one, attach additional sheet)
Name o	of Debtor:	Case Number:	Date Filed:
Distric	t:	Relationship:	Judge:
10K an Section request	Exhibit A completed if debtor is required to file periodic reports (e.g., forms and 10Q) with the Securities and Exchange Commission pursuant to an 13 or 15(d) of the Securities Exchange Act of 1934 and is ting relief under chapter 11.) hibit A is attached and made a part of this petition.	(To be completed whose debts are properties of the petitioner of that I have informed the petition chapter 7, 11, 12, or 13 of tittle explained the relief available unthat I delivered to the debtor to Bankruptcy Code.	if debtor is an individual rimarily consumer debts.) named in the foregoing petition, declare that [he or she] may proceed under le 11, United States Code, and have der each such chapter. I further certify the notice required by § 342(b) of the
		X /s/ G. Paul McFarling Signature of Attorney for Debtor(s)	9/05/08 Date
or safe	es, and Exhibit C is attached and made a part of this petition.	bit D ach spouse must complete and atta	
If this i	is a joint petition: Exhibit D also completed and signed by the joint debtor is attached.	ed a made a part of this petition.	
	9	O days than in any other District. partner, or partnership pending in take of business or principal assets but is a defendant in an action or pro-	this District. in the United States in this District, oceeding [in a federal or state court]
	Certification by a Debtor Who Reside	es as a Tenant of Residential l	Property
	(Check all app	olicable boxes.)	
	Landlord has a judgment against the debtor for possession of deb	otor's residence. (If box checked, co	omplete the following.)
	Landlord has a judgment against the debtor for possession of deb	otor's residence. (If box checked, co	omplete the following.)
	Landlord has a judgment against the debtor for possession of deb (Name of landlord or lesso		omplete the following.)
	Landlord has a judgment against the debtor for possession of deb (Name of landlord or lesso	or that obtained judgment) adlord or lessor) e circumstances under which the de	ebtor would be permitted to cure
	Landlord has a judgment against the debtor for possession of debtors (Name of landlord or lesson (Address of landlord claims that under applicable nonbankruptcy law, there are	or that obtained judgment) adlord or lessor) e circumstances under which the desession, after the judgment for poseny rent that would become due du	ebtor would be permitted to cure session was entered, and

Voluntary Petition

(This page must be completed and filed in every case)

Name of Debtor(s):

Herrera, Florinda Monica

§ 1515 are attached.

Signatures

Signature(s) of Debtor(s) (Individual/Joint)

Doc 1

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under Chapter 7] I am aware that I may proceed under chapter 7, 11, 12 or 13 of title 11, United State Code, understand the relief available under each such chapter, and choose to proceed under chapter 7

[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ Florinda Monica Herrera

Signature of Debtor

Florinda Monica Herrera

X

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

September 5, 2008

Date

in a foreign proceeding, and that I am authorized to file this petition. (Check only one box.)

☐ I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C.

Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this

petition is true and correct, that I am the foreign representative of a debtor

☐ Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

X

Signature of Foreign Representative

Printed Name of Foreign Representative

Signature of Attorney*

X /s/ G. Paul McFarling

Signature of Attorney for Debtor(s)

G. Paul McFarling 6244669

Printed Name of Attorney for Debtor(s)

Attorneys Serving You, LLC

Firm Name

1701 S. 1st Ave., Ste. 207

Address

Maywood, IL 60153-2400

(708) 344-4567

Telephone Number

September 5, 2008

*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Signature of Non-Attorney Petition Preparer

I declare under penalty of perjury that: 1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; 2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h) and 342(b); 3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social Security Number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)

Address

Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose social security number is provided above

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. § 110; 18 U.S.C. § 156.

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Official Form 1, Exhibit D (10/06)

Signature of Debtor: /s/ Florinda Monica Herrera

Date: September 5, 2008

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Page 4 of 47 Document **United States Bankruptcy Court**

Northern District of Illinois

IN RE:	Case No
Herrera, Florinda Monica	Chapter 7
Debtor(s)	• •

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

1. Within the 180 days before the filing of my bankruptcy case , I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.	n
2. Within the 180 days before the filing of my bankruptcy case , I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.	n e
3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Must be accompanied by a motion for determination by the court.] [Summarize exigen circumstances here.]	g
If the court is satisfied with the reasons stated in your motion, it will send you an order approving your request. You must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy case and promptly file a certificate from the agency that provided the briefing, together with a copy of any debt management plan developed through the agency. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. A motion for extension must be filed within the 30-day period. Failure to fulfill these requirements may result in dismissal of your case. If the court is no satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing, your case may be dismissed.	n y t
obtain the credit counseling briefing within the first 30 days after you file your bankruptcy case and promptly file a certificate from the agency that provided the briefing, together with a copy of any debt management plan developed through the agency. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. A motion for extension mus be filed within the 30-day period. Failure to fulfill these requirements may result in dismissal of your case. If the court is no satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing, your case may be	n y t e
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obtain the credit counseling briefing within the first 30 days after you file your bankruptcy case and promptly file a certificate from the agency that provided the briefing, together with a copy of any debt management plan developed through the agency. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. A motion for extension mus be filed within the 30-day period. Failure to fulfill these requirements may result in dismissal of your case. If the court is no satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing, your case may be dismissed. 4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied by a motion for determination by the court.] Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable.	n y t t e
obtain the credit counseling briefing within the first 30 days after you file your bankruptcy case and promptly file a certificate from the agency that provided the briefing, together with a copy of any debt management plan developed through the agency. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. A motion for extension muss be filed within the 30-day period. Failure to fulfill these requirements may result in dismissal of your case. If the court is no satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing, your case may be dismissed. 4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied by a motion for determination by the court.] Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.); Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);	n y t t e a e
obtain the credit counseling briefing within the first 30 days after you file your bankruptcy case and promptly file a certificate from the agency that provided the briefing, together with a copy of any debt management plan developed through the agency. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. A motion for extension mus be filed within the 30-day period. Failure to fulfill these requirements may result in dismissal of your case. If the court is no satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing, your case may be dismissed. 4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied by a motion for determination by the court.] Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.); Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.); Active military duty in a military combat zone.	n y t t e

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Certificate Number: 02114-iln-cc-004247407

CERTIFICATE OF COUNSELING

I CERTIFY that on <u>06/17/08</u>, at <u>08:34</u> o'clock <u>PM EST</u>, <u>FLORINDA M HERRERA</u> received from <u>Consumer Credit</u> <u>Counseling Service of Greater Atlanta, Inc.</u>, an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the <u>NORTHERN DISTRICT OF ILLINOIS</u>, an individual [or group] briefing (including a briefing conducted by telephone or on the Internet) that complied with the provisions of 11 U.S.C. §§ 109(h) and 111. A debt repayment Plan <u>was not prepared</u>. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted <u>by Internet</u>.

Date: 06-17-2008 By /s/BRUCE HANNIGAN

Name BRUCE HANNIGAN

Title Counselor

^{*} Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. See 11 U.S.C. §§ 109(h) and 521(b).

NOTICE TO INDIVIDUAL CONSUMER DEBTOR UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case. You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days <u>before</u> the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$39 administrative fee, \$15 trustee surcharge: Total fee \$299)

- 1. Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.
- 2. Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.
- 3. The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.
- 4. Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

<u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$39 administrative fee: Total fee \$274)

- 1. Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in instalments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.
- 2. Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them,

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using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

3. After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1000 filing fee, \$39 administrative fee: Total fee \$1039)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$39 administrative fee: Total fee \$239)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

Certificate of [Non-Attorney] Bankruptcy Petition Preparer

I, the [non-attorney] bankruptcy petition preparer signing the debtor's petition, hereby certify that I delivered to the debtor this notice required by § 342(b) of the Bankruptcy Code.

Printed Name and title, if any, of Bankruptcy Petition Preparer Address:	Social Security number (If the bankruptcy petition preparer is not an individual, state
	the Social Security number of the officer,
	principal, responsible person, or partner of
	the bankruptcy petition preparer.)
x	(Required by 11 U.S.C. § 110.)
Signature of Bankruptcy Petition Preparer of officer, principal, responsible person, or	
partner whose Social Security number is provided above.	
Certificate of the Debtor	

I (We), the debtor(s), affirm that I (we) have received and read this notice.

Herrera, Florinda Monica	X /s/ Florinda Monica Herrera	9/05/2008
Printed Name(s) of Debtor(s)	Signature of Debtor	Date
Case No. (if known)	X	
	Signature of Joint Debtor (if any)	Date

B22A (Official Form 22A) (Chapter 7) (01/08) $In\ re:$ Herrera, Florinda Monica Case Number: _

Case 08-23559

(If known)

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According to the calculations required by this statement:

☐ The presumption arises

▼ The presumption does not arise

(Check the box as directed in Parts I, III, and VI of this statement.)

Desc Main

CHAPTER 7 STATEMENT OF CURRENT MONTHLY INCOME AND MEANS-TEST CALCULATION

Doc 1 Filed 09/05/08

Document

In addition to Schedules I and J, this statement must be completed by every individual chapter 7 debtor, whether or not filing jointly. Joint debtors may complete one statement only.

	Рагі	1. EXCLUSION FOR DISABLED VE	LIERANS AND NON-CONSUM	EK DEBTOK	•
1A	Veteran's	a disabled veteran described in the Veteran's Declaration, (2) check the box for "The presention in Part VIII. Do not complete any of the	umption does not arise" at the top of th	•	_
111	in 38 U.S.	n's Declaration. By checking this box, I dec C. § 3741(1)) whose indebtedness occurred p § 101(d)(1)) or while I was performing a hor	orimarily during a period in which I wa	s on active duty	(as defined in
1B	•	ots are not primarily consumer debts, check that yof the remaining parts of this statement.	he box below and complete the verifica	ntion in Part VIII	. Do not
	☐ Declara	ation of non-consumer debts. By checking t	this box, I declare that my debts are no	t primarily consu	ımer debts.
	P	art II. CALCULATION OF MONTH	LY INCOME FOR § 707(b)(7) E	XCLUSION	
	Marital/fi	ling status. Check the box that applies and c	omplete the balance of this part of this	statement as dir	ected.
	a. 🗹 Unm	arried. Complete only Column A ("Debtor	's Income") for Lines 3-11.		
	pena are li	ried, not filing jointly, with declaration of sep lty of perjury: "My spouse and I are legally s iving apart other than for the purpose of evad aplete only Column A ("Debtor's Income")	separated under applicable non-bankrulling the requirements of § 707(b)(2)(A	ptcy law or my s	pouse and I
2		ried, not filing jointly, without the declaration Imn A ("Debtor's Income") and Column E	-	e 2.b above. Con	aplete both
		ried, filing jointly. Complete both Column A s 3-11.	A ("Debtor's Income") and Column	B (''Spouse's Ir	acome") for
	All figures	must reflect average monthly income receive	ed from all sources, derived during	Column A	Column B
	month befo	endar months prior to filing the bankruptcy core the filing. If the amount of monthly income the six-month total by six, and enter the res	ne varied during the six months, you	Debtor's Income	Spouse's Income
3	Gross wag	ges, salary, tips, bonuses, overtime, commi	ssions.	\$ 624.63	\$
4	a and enter one busine attachment	om the operation of a business, profession the difference in the appropriate column(s) ass, profession or farm, enter aggregate number. Do not enter a number less than zero. Do nentered on Line b as a deduction in Part V	of Line 4. If you operate more than ers and provide details on an ot include any part of the business		
	a. Gro	ss receipts	\$		
	b. Ord	inary and necessary business expenses	\$		
	c. Bus	iness income	Subtract Line b from Line a	\$	\$

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B22A (Officia	al Form 22A) (Chapter 7) (01/08)								
	diffe	and other real property income. rence in the appropriate column(s) of the operating o	of Line 5. Do n	ot enter a n	umber les	s than zero. I	Do			
5	a.	Gross receipts		\$						
	b.	Ordinary and necessary operating	expenses	\$						
	c.	Rent and other real property incor	me	Subtract I	Line b fro	m Line a			\$	
6	Inter	rest, dividends, and royalties.					φ \$		\$	
7		ion and retirement income.					\$		\$	
8	expe that	amounts paid by another person nses of the debtor or the debtor's purpose. Do not include alimony o our spouse if Column B is complete	dependents, i r separate mair	ncluding cl	nild supp	ort paid for			\$	
9	How was a	mployment compensation. Enter the ever, if you contend that unemploys a benefit under the Social Security Amn A or B, but instead state the am	ment compensa Act, do not list	tion receive the amount	ed by you	or your spou	se			
	clai	employment compensation imed to be a benefit under the sial Security Act	Debtor \$		Spouse	\$			\$	
10	source paid alime Secu	me from all other sources. Specify tes on a separate page. Do not include by your spouse if Column B is component of separate maintenance. Do not you have a separate maintenance as a set time of international or domestic territories.	ide alimony or mpleted, but in not include any include any	r separate i nclude all o y benefits re	maintena other pay eceived un	nce payment ments of order the Social	al			
	a.	PT employment during March -	Apr 2008			\$ 200.0	0			
	b.					\$				
		al and enter on Line 10					\$	200.00	\$	
11		otal of Current Monthly Income if Column B is completed, add Line					A,	824.63	\$	
12	Line	11, Column A to Line 11, Column bleted, enter the amount from Line 1	B, and enter the			-	\$			824.63
		Part III. AP	PLICATION	N OF § 70°	7(B)(7) I	EXCLUSIO	N			
13	I	ualized Current Monthly Income nd enter the result.	for § 707(b)(7). Multiply	the amou	nt from Line	12 by the		\$	9,895.56
14	hous	licable median family income. Entehold size. (This information is ava ankruptcy court.)		-				rk of		
	a. En	ter debtor's state of residence: Illino	ois		_ b. Ente	r debtor's ho	usehold si	ze:	\$	44,673.00
15	7	lication of Section707(b)(7). Checle Fine amount on Line 13 is less than not arise" at the top of page 1 of this	n or equal to t	he amount	on Line	14. Check the		-	-	
	l	The amount on Line 13 is more th		_		_				
	ГП ,	the amount on Line 13 is more th	an the amount	t on Line I	+. Comple	ete the remaii	nng parts	oi unis state	amen	ι.

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		Part IV. CALCULATI	ON OF CURR	ENT	MONTHLY	INCOME FO	OR § 707(b)(2)	
16	Enter	the amount from Line 12.						\$
17	Line 1 debtor payme debtor adjusts	al adjustment. If you checked 1, Column B that was NOT parties dependents. Specify in the lent of the spouse's tax liability stay dependents) and the amount ments on a separate page. If you	aid on a regular batines below the bator or the spouse's sut of income devot	asis for sis for support of the earth of the	the household excluding the of persons oth ach purpose. I	d expenses of the Column B incorporate than the debte of necessary, list zero.	e debtor or the me (such as or or the	
	c.							\$
18	Curre	ent monthly income for § 707	(b)(2). Subtract I	Line 17	from Line 16	and enter the re	sult.	\$
		Part V. CAL Subpart A: Deduct	CULATION O					
19A	Nation	nal Standards: food, clothing nal Standards for Food, Clothin ilable at www.usdoj.gov/ust/ or	ng and Other Item	ns for th	ne applicable l	nousehold size. (\$
	11444	nai Standards, nearth care, E				n ika wanonara		
19 B	Out-of www.t your h housel the nu memb housel	f-Pocket Health Care for perso f-Pocket Health Care for perso usdoj.gov/ust/ or from the clerl lousehold who are under 65 years hold who are 65 years of age o mber stated in Line 14b.) Mult ers under 65, and enter the resu hold members 65 and older, an care amount, and enter the res	ons under 65 years of ago k of the bankrupto ars of age, and en rolder. (The total tiply Line al by Lult in Line c1. Mud enter the result	s of age e or old cy cour iter in L l number ine b1	e, and in Line and in Line and in Line to the number of household to obtain a total time a2 by Line a2 by Line a2 by Line and in Line a2 by Line and in Line and L	rmation is availa ne b1 the numbe mber of member ld members mus tal amount for ho ne b2 to obtain a	onal Standards for able at or of members of es of your t be the same as ousehold total amount for	
19B	Out-of www.i your h housel the nu memb housel health	f-Pocket Health Care for perso usdoj.gov/ust/ or from the clerl lousehold who are under 65 year hold who are 65 years of age o mber stated in Line 14b.) Mult ers under 65, and enter the resulted hold members 65 and older, and	ons under 65 years of agoing 65 years of agoing ars of agoing and en or older. (The total tiply Line all by Lult in Line c1. Must ad enter the result tipls.)	s of age e or old ey cour ter in I l numbe ine b1 ultiply I in Line	e, and in Line and the control of th	a2 the IRS Nation is availance b1 the number of member of member at amount for here b2 to obtain a	onal Standards for able at or of members of rs of your t be the same as busehold total amount for btain a total	
19B	Out-of www.i your h housel the nu memb housel health	f-Pocket Health Care for perso usdoj.gov/ust/ or from the clerk cousehold who are under 65 years hold who are 65 years of age o mber stated in Line 14b.) Mult ers under 65, and enter the reso hold members 65 and older, an care amount, and enter the reso	ons under 65 years of agoing 65 years of agoing ars of agoing and en or older. (The total tiply Line all by Lult in Line c1. Must ad enter the result tipls.)	s of age e or old ey cour ter in I l numbe ine b1 ultiply I in Line	e, and in Line and the control of th	a2 the IRS Nation remation is available to the number of member and members must all amount for home b2 to obtain a ses c1 and c2 to other to the ces c5 years of	onal Standards for able at or of members of rs of your t be the same as busehold total amount for btain a total	
19B	Out-of www.i your h housel the nu memb housel health	f-Pocket Health Care for perso usdoj.gov/ust/ or from the clerk ousehold who are under 65 ye. hold who are 65 years of age o mber stated in Line 14b.) Multi- ers under 65, and enter the resulted hold members 65 and older, and care amount, and enter the resulted sehold members under 65 years	ons under 65 years of agoing 65 years of agoing ars of agoing and en or older. (The total tiply Line all by Lult in Line c1. Must ad enter the result tipls.)	s of age e or old ey cour tter in L l numbe tine b1 altiply I in Line	ler. (This info t.) Enter in Li Line b2 the nu er of househol to obtain a to Line a2 by Line e c2. Add Line	a2 the IRS Nation remation is available to the number of member and members must all amount for home b2 to obtain a ses c1 and c2 to obtain a ses c4 member of member of member of member of member of the interval of the case of the interval of the interva	onal Standards for able at or of members of rs of your t be the same as busehold total amount for btain a total	
19B	Out-of- www.i your h housel the nu memb housel health Housel a1.	f-Pocket Health Care for perso usdoj.gov/ust/ or from the clerk tousehold who are under 65 years of age of mber stated in Line 14b.) Multiers under 65, and enter the resulted members 65 and older, and care amount, and enter the resulted members under 65 years of the latest t	ons under 65 years of agoing 65 years of agoing ars of agoing and en or older. (The total tiply Line all by Lult in Line c1. Must ad enter the result tipls.)	s of age e or old ey cour iter in I l numbe ine b1 iltiply I in Line Hous a2.	e, and in Line and the control of th	a2 the IRS Nation remation is available to the number of member and members must all amount for home b2 to obtain a ses c1 and c2 to obtain a ses c4 member of member of member of member of member of the interval of the case of the interval of the interva	onal Standards for able at or of members of rs of your t be the same as busehold total amount for btain a total	\$
19B 20A	Out-of- www.i your h housel the nu memb housel health Housel a1. b1. c1.	f-Pocket Health Care for perso usdoj.gov/ust/ or from the clerk cousehold who are under 65 years of age o mber stated in Line 14b.) Multiers under 65, and enter the resulted members 65 and older, and care amount, and enter the resulted members under 65 years of age of the members with the resulted members 65 and older, and care amount, and enter the resulted members under 65 years and the members under 65 years of the	ns under 65 years of age k of the bankrupto ars of age, and en r older. (The total tiply Line a1 by Lult in Line c1. Mud enter the result tult in Line 19B. ars of age	s of age e or old ey cour iter in I l numbe ine b1 intiply I in Line Hous a2. b2. c2.	e, and in Line and the ler. (This info to to) Enter in Li Line b2 the number of household to obtain a total to care a2 by Line a2 by Line a2 and Line a2 by Line a2 household members allowance produced by Subtotal county and the care and the county are allowed by the level of th	a2 the IRS Nation remation is available the number of members must all amount for home b2 to obtain a less c1 and c2 to obtain a less c4 and c5 were member the amount of	onal Standards for able at a cr of members of as of your to be the same as ousehold total amount for btain a total age or older	
	Out-of- www.i your h housel the nu memb housel health Hou: a1. b1. c1. Local and U inform Local the IR inform the tot subtra a. b.	f-Pocket Health Care for perso usdoj.gov/ust/ or from the clerk rousehold who are under 65 years hold who are 65 years of age of mber stated in Line 14b.) Multi ers under 65, and enter the resi hold members 65 and older, an care amount, and enter the resi sehold members under 65 years Allowance per member Number of members Subtotal Standards: housing and utili tilities Standards; non-mortgage	ities; non-mortgage/rards; mortgage/rards; mor	s of age e or old ey cour tter in L l numb ine b1 in Line Hous a2. b2. c2. age exp e applic m the cl rent exp mt expe m the cl bts secue e 20B.	e, and in Line and the control of the number of the country and the barry and the country and	a2 the IRS Nation remation is available to the number of member and members must all amount for home b2 to obtain a ses c1 and c2 to obtain a ses c1	er of members of as of your to be the same as ousehold total amount for btain a total age or older er. (This the amount of y size (this enter on Line b in Line 42;	\$

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21	Local Standards: housing and utilities; adjustment. If you contend that the process set out in Lines 20A and 20B does not accurately compute the allowance to which you are entitled under the IRS Housing and Utilities Standards, enter any additional amount to which you contend you are entitled, and state the basis for your contention in the space below:				
				\$	
	Local Standards: transportation; vehicle operation/public transportation expense. You are entitled an expense allowance in this category regardless of whether you pay the expenses of operating a vehicle and regardless of whether you use public transportation.				
		k the number of vehicles for which you pay the operating expenses or uses are included as a contribution to your household expenses in Line			
22A	\square 0	☐ 1 ☐ 2 or more.			
	If you checked 0, enter on Line 22A the "Public Transportation" amount from IRS Local Standards: Transportation. If you checked 1 or 2 or more, enter on Line 22A the "Operating Costs" amount from IRS Local Standards: Transportation for the applicable number of vehicles in the applicable Metropolitan Statistical Area or Census Region. (These amounts are available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)				
		l Standards: transportation; additional public transportation exp	ense. If you pay the operating	\$	
22B	_	nses for a vehicle and also use public transportation, and you contend ional deduction for your public transportation expenses, enter on Line			
220	Trans	sportation" amount from IRS Local Standards: Transportation. (This a		\$	
	www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)				
	Local Standards: transportation ownership/lease expense; Vehicle 1. Check the number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.)				
	☐ 1 ☐ 2 or more.				
		r, in Line a below, the "Ownership Costs" for "One Car" from the IRS sportation (available at www.usdoj.gov/ust/ or from the clerk of the ba			
23	the to	of the Average Monthly Payments for any debts secured by Vehicact Line b from Line a and enter the result in Line 23. Do not enter a	le 1, as stated in Line 42;		
	a.	IRS Transportation Standards, Ownership Costs	\$		
	b.	Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 42	\$		
	c.	Net ownership/lease expense for Vehicle 1	Subtract Line b from Line a	\$	
	Local Standards: transportation ownership/lease expense; Vehicle 2. Complete this Line only if you checked the "2 or more" Box in Line 23.				
24	Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 42; subtract Line b from Line a and enter the result in Line 24. Do not enter an amount less than zero.				
	a.	IRS Transportation Standards, Ownership Costs, Second Car	\$		
	b.	Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 42	\$		
	c.	Net ownership/lease expense for Vehicle 2	Subtract Line b from Line a	1.	

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BZZA (Official Form 22A) (Chapter 7) (01/08)		
25	Other Necessary Expenses: taxes. Enter the total average month federal, state, and local taxes, other than real estate and sales taxe taxes, social security taxes, and Medicare taxes. Do not include the state of the security taxes are taxes.	s, such as income taxes, self employment	\$
26	Other Necessary Expenses: involuntary deductions for employment. Enter the total average monthly payroll deductions that are required for your employment, such as retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as voluntary 401(k) contributions.		
27	Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance.		
28	Other Necessary Expenses: court-ordered payments. Enter the required to pay pursuant to the order of a court or administrative apayments. Do not include payments on past due obligations in	agency, such as spousal or child support	\$
29	Other Necessary Expenses: education for employment or for child. Enter the total average monthly amount that you actually employment and for education that is required for a physically or whom no public education providing similar services is available.	spend for education that is a condition of mentally challenged dependent child for	\$
30	Other Necessary Expenses: childcare. Enter the total average m on childcare—such as baby-sitting, day care, nursery and prescho payments.		\$
31	Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Line 19B. Do not include payments for health insurance or health savings accounts listed in Line 34.		
32	Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service— such as pagers, call waiting, caller id, special long distance, or internet service—to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted.		
33	33 Total Expenses Allowed under IRS Standards. Enter the total of Lines 19 through 32.		
Subpart B: Additional Expense Deductions under § 707(b) Note: Do not include any expenses that you have listed in Lines 19-32			
34	Health Insurance, Disability Insurance, and Health Savings Account Expenses. List the monthly expenses in the categories set out in lines a-c below that are reasonably necessary for yourself, your spouse, or your dependents. a. Health Insurance \$ b. Disability Insurance \$		
35	Continued contributions to the care of household or family members. Enter the total average actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses.		
Protection against family violence. Enter the total average reasonably necessary monthly expenses that you actually incurred to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court.			\$

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37	Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities, that you actually expend for home energy costs. You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional amount claimed is reasonable and necessary.					\$	
38	Education expenses for dependent children less than 18. Enter the total average monthly expenses that you actually incur, not to exceed \$137.50 per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards.					\$	
39	cloth Natio	Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) You must demonstrate that the additional amount claimed is reasonable and necessary.					\$
40		tinued charitable contributions or financial instruments to a char		-			\$
41	Tota	l Additional Expense Deduction	ns under	§ 707(b). Enter the tot	al of Lines 34 throu	ıgh 40	\$
		S	ubpart C	: Deductions for Deb	t Payment		
	Future payments on secured claims. For each of your debts that is secured by an interest in property that you own, list the name of the creditor, identify the property securing the debt, state the Average Monthly Payment, and check whether the payment includes taxes or insurance. The Average Monthly Payment is the total of all amounts scheduled as contractually due to each Secured Creditor in the 60 months following the filing of the bankruptcy case, divided by 60. If necessary, list additional entries on a separate page. Enter the total of the Average Monthly Payments on Line 42.						
42		Name of Creditor	Property	Securing the Debt	Average Monthly Payment	Does payment include taxes or insurance?	
	a.				\$	yes no	
	b.				\$	☐ yes ☐ no	
	c.				\$	yes no	
				Total: Add	lines a, b and c.		\$
	Other payments on secured claims. If any of debts listed in Line 42 are secured by your primary residence, a motor vehicle, or other property necessary for your support or the support of your dependent you may include in your deduction 1/60th of any amount (the "cure amount") that you must pay the creditor in addition to the payments listed in Line 42, in order to maintain possession of the property. The cure amount would include any sums in default that must be paid in order to avoid repossession or foreclosure. List and total any such amounts in the following chart. If necessary, list additional entries on separate page.					your dependents, ust pay the he property. The dession or	
43		Name of Creditor		Property Securing the	e Debt	1/60th of the Cure Amount	
	a.					\$	
	b.					\$	
	c.					\$	
					Total: Add	l lines a, b and c.	\$
44	Payments on prepetition priority claims. Enter the total amount, divided by 60, of all priority claims, such as priority tax, child support and alimony claims, for which you were liable at the time of your bankruptcy filing. Do not include current obligations, such as those set out in Line 28.					\$	

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B22A (Official Form 22A) (Chapter 7) (01/08)					
	Chapter 13 administrative expenses. If you are eligible to file a case under chapter 13, complete the following chart, multiply the amount in line a by the amount in line b, and enter the resulting administrative expense.					
	a. Projected average monthly chapter 13 plan payment.	\$				
45	b. Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)	X				
	c. Average monthly administrative expense of chapter 13 case	Total: Multiply Lines a and b	\$			
46	Total Deductions for Debt Payment. Enter the total of Lines 42 th	nrough 45.	\$			
	Subpart D: Total Deductions	from Income				
47	Total of all deductions allowed under § 707(b)(2). Enter the total	of Lines 33, 41, and 46.	\$			
	Part VI. DETERMINATION OF § 707(b)(2) PRESUMPTION					
48	Enter the amount from Line 18 (Current monthly income for §	707(b)(2))	\$			
49	Enter the amount from Line 47 (Total of all deductions allowed under § 707(b)(2))					
50	Monthly disposable income under § 707(b)(2). Subtract Line 49 to	from Line 48 and enter the result.	\$			
51	60-month disposable income under § 707(b)(2). Multiply the amount in Line 50 by the number 60 and enter the result.					
	Initial presumption determination. Check the applicable box and proceed as directed.					
	The amount on Line 51 is less than \$6,575. Check the box for this statement, and complete the verification in Part VIII. Do not		e top of page 1 of			
52	The amount set forth on Line 51 is more than \$10,950. Check the box for "The presumption arises" at the top of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII. Do not complete the remainder of Part VI.					
	The amount on Line 51 is at least \$6,575, but not more than though 55).	\$10,950. Complete the remainder of Pa	rt VI (Lines 53			
53	Enter the amount of your total non-priority unsecured debt		\$			
54	Threshold debt payment amount. Multiply the amount in Line 53 by the number 0.25 and enter the result.					
	Secondary presumption determination. Check the applicable box	and proceed as directed.				
55	☐ The amount on Line 51 is less than the amount on Line 54. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete the verification in Part VIII.					
The amount on Line 51 is equal to or greater than the amount on Line 54. Check the box for "The parises" at the top of page 1 of this statement, and complete the verification in Part VIII. You may also covVII.						

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B22A (Official Form 22A) (Chapter 7) (01/08)

Part VII. ADDITIONAL EXPENSE CLAIMS

Other Expenses. List and describe any monthly expenses, not otherwise stated in this form, that are required for the health and welfare of you and your family and that you contend should be an additional deduction from your current monthly income under $\S 707(b)(2)(A)(ii)(I)$. If necessary, list additional sources on a separate page. All figures should reflect your average monthly expense for each item. Total the expenses.

	Expense Description	Monthly Amount
a.		\$
b.		\$
c.		\$
	Total: Add Lines a, b and c	\$

Part VIII. VERIFICATION

I declare under penalty of perjury that the information provided in this statement is true and correct. (If this a join	t case,
both debtors must sign.)	

Date: September 5, 2008 Signature: /s/ Florinda Monica Herrera

Date: September 5, 2008 Signature: /s/ Florinda Monica Herrera

(Joint Debtor, if any)

57

56

 $_{B6 \text{ Summary}}$ Case 08-23559 Doc 1

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Northern District of Illinois

IN RE:		Case No.
Herrera, Florinda Monica		Chapter 7
	Debtor(s)	•

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors also must complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NUMBER OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	\$ 592,000.00		
B - Personal Property	Yes	3	\$ 14,698.00		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		\$ 619,719.99	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	1		\$ 0.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	6		\$ 156,438.81	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	2			
I - Current Income of Individual Debtor(s)	Yes	1			\$ 649.73
J - Current Expenditures of Individual Debtor(s)	Yes	1			\$ 4,007.53
	TOTAL	18	\$ 606,698.00	\$ 776,158.80	

Case 08-23559 Form 6 - Statistical Summary (12/07)

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Northern District of Illinois

IN RE:	Case No
Herrera, Florinda Monica	Chapter 7
Debtor(s)	•

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	\$ 0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	\$ 0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	\$ 0.00
Student Loan Obligations (from Schedule F)	\$ 0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	\$ 0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	\$ 0.00
TOTAL	\$ 0.00

State the following:

Average Income (from Schedule I, Line 16)	\$ 649.73
Average Expenses (from Schedule J, Line 18)	\$ 4,007.53
Current Monthly Income (from Form 22A Line 12; OR , Form 22B Line 11; OR , Form 22C Line 20)	\$ 824.63

State the following:

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column		\$ 67,091.99
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.	\$ 0.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		\$ 0.00
4. Total from Schedule F		\$ 156,438.81
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		\$ 223,530.80

Debtor(s)

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(If known)

IN RE Herrera, Florinda Monica

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Case No.

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

DESCRIPTION AND LOCATION OF PROPERTY	NATURE OF DEBTOR'S INTEREST IN PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION	AMOUNT OF SECURED CLAIM
Debtor's residence - condominium - located at 1250 S. Indiana, Apt. 1308, Chicago, IL 60605	Fee Simple		367,000.00	317,333.00
Single Family Home located at 3801 W. 56th St, Chicago 60629	Fee Simple		225,000.00	284,069.99
	1	-		

592,000.00

TOTAL

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IN RE Herrera, Florinda Monica

Debtor(s)

(If known)

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

					1
	TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
1.	Cash on hand.		Cash		50.00
	Checking, savings or other financial accounts, certificates of deposit or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.		WAMU Checking account	С	3.00
3.	Security deposits with public utilities, telephone companies, landlords, and others.	X			
4.	Household goods and furnishings, include audio, video, and computer equipment.		Miscellaneous household furnishings, appliances and electronics.		3,450.00
5.	Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	X			
6.	Wearing apparel.		Normal compliment of clothing.		400.00
7.	Furs and jewelry.		Miscellaneous pieces jewelry, watches, etc. of limited depreciated value.		200.00
8.	Firearms and sports, photographic, and other hobby equipment.	X			
9.	Interest in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X			
10.	Annuities. Itemize and name each issue.	X			
11.	Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
12.	Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	X			
13.	Stock and interests in incorporated and unincorporated businesses. Itemize.		Options Xpress - Cash/Options/Stocks Account Number: 0488-1587		300.00

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IN RE Herrera, Florinda Monica

_ Case No. _

Debtor(s)

(If known)

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

					1
	TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
14.	Interests in partnerships or joint ventures. Itemize.	Х			
15.	Government and corporate bonds and other negotiable and non-negotiable instruments.	X			
16.	Accounts receivable.	х			
	Alimony, maintenance, support, and property settlements in which the debtor is or may be entitled. Give particulars.	X			
18.	Other liquidated debts owed to debtor including tax refunds. Give particulars.	X			
19.	Equitable or future interest, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	x			
20.	Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
21.	Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			
22.	Patents, copyrights, and other intellectual property. Give particulars.	Х			
23.	Licenses, franchises, and other general intangibles. Give particulars.	X			
24.	Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25.	Automobiles, trucks, trailers, and other vehicles and accessories.		2006 Mazda3 approximate mileage: 45K		10,295.00
26.	Boats, motors, and accessories.	X			
27.	Aircraft and accessories.	X			
28.	Office equipment, furnishings, and supplies.	X			
29.	Machinery, fixtures, equipment, and supplies used in business.	X			
30.	Inventory.	X			
31.	Animals.	X			

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Debtor(s)

_ Case No. _

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

32. Crops - growing or harvested. Give puriculars. 33. Farming equipment and implements. 34. Farm applies, chemicals, and feet. 35. Other personal property of any kind not already listed. hemize.					
particulars. 35. Farming equipment and implements. 4 Farm supplies, chemicals, and feed. 35. Other personal property of any kind not already listed. Hemize. 4 X X	TYPE OF PROPERTY	O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR
33. Farming equipment and implements. 34. Farm supplies, chemicals, and feed. 35. Other personal property of any kind not already listed. Itemize.	32. Crops - growing or harvested. Give	X			
54. Farm supplies, chemicals, and feed. 35. Other personal property of any kind not already listed, itemize.		х			
35. Other personal property of any kind not already listed. Itemize.					
	35. Other personal property of any kind	X			
TOTAL 14 698 00	35. Other personal property of any kind not already listed. Itemize.	*			
			TO TO	ГАТ	14,698.00

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IN RE Herrera, Florinda Monica

Debtor(s)

Case No. __ (If known)

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor elects the exemptions to which debtor is entitled under: (Check one box)

Check if debtor claims a homestead exemption that exceeds \$136,875.

11 U.S.C. § 522(b)(2) 11 U.S.C. § 522(b)(3)

DESCRIPTION OF PROPERTY	SPECIFY LAW PROVIDING EACH EXEMPTION	VALUE OF CLAIMED EXEMPTION	CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTIONS
SCHEDULE A - REAL PROPERTY			
Debtor's residence - condominium - located at 1250 S. Indiana, Apt. 1308, Chicago, IL 60605	735 ILCS 5 §12-901	15,000.00	367,000.00
SCHEDULE B - PERSONAL PROPERTY			
Cash	735 ILCS 5 §12-1001(b)	50.00	50.00
WAMU Checking account	735 ILCS 5 §12-1001(b)	3.00	3.00
Miscellaneous household furnishings, appliances and electronics.	735 ILCS 5 §12-1001(b)	3,447.00	3,450.00
Normal compliment of clothing.	735 ILCS 5 §12-1001(a)	400.00	400.00
Miscellaneous pieces jewelry, watches, etc. of limited depreciated value.	735 ILCS 5 §12-1001(b)	200.00	200.00
Options Xpress - Cash/Options/Stocks Account Number: 0488-1587	735 ILCS 5 §12-1001(b)	300.00	300.00
2006 Mazda3 approximate mileage: 45K	735 ILCS 5 §12-1001(c)	2,400.00	10,295.00

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IN RE Herrera, Florinda Monica

Debtor(s)

(If known)

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other

List creditors in alphabetical order to the extent practicable. If a minor child is the creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO. 9901387554 Harris N.a. Po Box 94034 Palatine, IL 60094			Installment account opened 6/06 Auto Ioan on '06 Mazda 3				18,317.00	8,022.00
ACCOUNT NO. 2770010216216 Select Portfolio Svcin Po Box 65250 Salt Lake City, UT 84165	-		VALUE \$ 10,295.00 Mortgage account opened 11/06 1st Mortgage on 3801 W. 56th Street, Chicago				245,196.00	20,196.00
ACCOUNT NO. 5120043467661			VALUE \$ 225,000.00 Mortgage account opened 7/06	_			317,333.00	
Wachovia Mortgage, Fsb 4101 Wiseman Blvd # Mc-t San Antonio, TX 78251			Mortgage on 1250 S. Indiana Street, Unit 1308, Chicago					
	İ		VALUE \$ 367,000.00					
ACCOUNT NO. 0662790906 Washington Mutual Bank 3990 S Babcock St Melbourne, FL 32901			Revolving account opened 3/07 2nd Mortgage on 3801 W. 56th Street, Chicago (home equity loan) VALUE \$ 225,000.00				38,873.99	38,873.99
• continuation sheets attached	,		(Total of th		otota		\$ 619,719.99	\$ 67,091.99
			(Use only on la		Tota	ıl	\$ 619,719.99	\$ 67,091.99

(Report also on Summary of Schedules.)

(If applicable, report also on Statistical Summary of Certain Liabilities and Related Data.)

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IN RE Herrera, Florinda Monica

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Debtor(s)

Case No. _____(If known)

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts <u>not</u> entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

the	Statistical Summary of Certain Liabilities and Related Data.
▼	Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.
ΤY	PES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)
	Domestic Support Obligations Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).
	Extensions of credit in an involuntary case Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).
	Wages, salaries, and commissions Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,950* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).
	Contributions to employee benefit plans Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).
	Certain farmers and fishermen Claims of certain farmers and fishermen, up to \$5,400* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).
	Deposits by individuals Claims of individuals up to \$2,425* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).
	Taxes and Certain Other Debts Owed to Governmental Units Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).
	Commitments to Maintain the Capital of an Insured Depository Institution Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).
	Claims for Death or Personal Injury While Debtor Was Intoxicated Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).
	* Amounts are subject to adjustment on April 1, 2010, and every three years thereafter with respect to cases commenced on or after the date of adjustment.
	ontinuation sheets attached

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IN RE Herrera, Florinda Monica

Case No.

Debtor(s) (If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured nonpriority claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER.

(See Instructions Above.)

DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE

CREDITOR'S NAME, MAILING ADDRESS INCLURING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER.

(See Instructions Above.)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, OR COMMUNI	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGEN	UNLIQUIDATE	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 3499910699697563			Open account opened 8/03	+		Ħ	
Amex Po Box 297871 Fort Lauderdale, FL 33329							
			Open account opened 3/03	_	L	Н	2,480.00
ACCOUNT NO. 3499914259025173 Amex Po Box 297871 Fort Lauderdale, FL 33329			open assessm opened 5/65				779.00
ACCOUNT NO. 3727-173198-660009 Amex PO BOX 0001 Los Angeles, CA 90096-0001			Date Claim: 04/11/08. Corporate AMEX Credit Card.				4.475.43
ACCOUNT NO. 3715-467435-41008 Amex Line Of Credit PO BOX 0001 Los Angeles, CA 90096-0001			Date Claim: 06/06/08.				,

5 continuation sheets attached

Subtotal (Total of this page)

14,382.69

6,648.26

Total

(Use only on last page of the completed Schedule F. Report also on the Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)

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IN RE Herrera, Florinda Monica

_ Case No. _ Debtor(s)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

		(•	Continuation Sheet)				
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
A CICOLINE NO			Assignee or other notification for:	П		H	
ACCOUNT NO. NCO Financial Systems 507 Prudential Rd. Horsham, PA 19044			Amex				
ACCOUNT NO. 3717-100866-92006			Date Claim: 06/15/08.				
Amex PO BOX 0001 Los Angeles, CA 90096-0001							2,480.69
ACCOUNT NO. 3717-187666-71000			date Claim: 06/18/08	H		H	
Amex PO BOX 0001 Los Angeles, CA 90096-0001	-						983.46
ACCOUNT NO. 4195-0010-0011-6801			Revolving account opened 7/06	Н		H	
Bank Of America Mexicana Mastercard Po Box 15726 Wilmington, DE 19886-5726							5,992.00
ACCOUNT NO. 4266-8410-3816-1442 Chase 800 Brooksedge Blvd Westerville, OH 43081	-		Revolving account opened 5/05				
5.40.440004754			Develoing account an anal 44/02	Н		\dashv	1,767.24
ACCOUNT NO. 542418081751 Citi Po Box 6241 Sioux Falls, SD 57117	_		Revolving account opened 11/02				22,041.00
ACCOUNT NO.			Assignee or other notification for:	\vdash		\dashv	22,041.00
Northland Group, Inc. PO Box 390905 Edina, MN 55439			Citi				
Sheet no1 of5 continuation sheets attached to	<u> </u>				4	Н	
Sheet no1 of5 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of the (Use only on last page of the completed Schedule F. Reporthe Summary of Schedules, and if applicable, on the Summary of Certain Liabilities and Relate	T t als	age Fota o o tica	e) al n al	\$ 33,264.39

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IN RE Herrera, Florinda Monica

_ Case No. _

Debtor(s)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

		(Continuation Sheet)				
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 6011-0076-2971-7439			Revolving account opened 6/07	П			
Discover Fin Svcs Llc Po Box 15316 Wilmington, DE 19850							5,669.59
ACCOUNT NO. 8255-90-914-2699799			Date Claim: 11/27/07.	Н			0,000.00
Dish Network							
Palatine, IL 60055							
							187.56
ACCOUNT NO. 4376476656420	_		Revolving account opened 8/94				
Dsnb Macys 9111 Duke Blvd Mason, OH 45040							4 422 00
ACCOUNT NO.			Assignee or other notification for:				1,132.00
Plaza Associates JAF Station PO Box 2769 New York, NY 10116-2769			Dsnb Macys				
ACCOUNT NO. C36-10337988			Date Claim: 01/02/08.				
Emergency Care Physician Svcs PO BOX 88640 Chicago, IL 60680-8640							
ACCOUNT NO. 4888-93104434-4756	-		Date Claim: 05/21/08.				460.79
FIA Card Services C/O Bank Of America - BK Dept PO Box 26012 Greenboro, NC 27420			Original Creditor: Bank of America				
·							329.55
ACCOUNT NO. 0237-2924	X		Date Claim: 06/05/08, Acc#0237-2924, Statement# 4844961				
First American CREDCO Facredco.Com PO BOX 509019			1011001				
San Diego, CA 92150-9019							78.75
Sheet no. 2 of 5 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims		<u> </u>	(Total of th	Sub is p		- 1	\$ 7,858.24
			(Use only on last page of the completed Schedule F. Report the Summary of Schedules, and if applicable, on the St Summary of Certain Liabilities and Relate	als atis	tica	n il	\$

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IN RE Herrera, Florinda Monica

Debtor(s)

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

		(Conunuation Sneet)				
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO.	х		Date Claim: 03/26/08. Commercial Rental Space.	П			
FOCUS, IV, LLC 10523 West Cermak Road, Suite 210 Westchester, IL 60154							9,909.25
			D 4 01 : 05/04/00 T: 1 1/1: /:				9,909.23
ACCOUNT NO. 48-22344 HGVC Hilton Grand Vacations Company, LLC 6335 Metro West Blvd., Suite 180 Orlando, FL 32835			Date Claim:05/21/08. Time share obligation.				
							1,853.80
ACCOUNT NO. 5127-3400-0049-1073 HSBC HSBC CardServices Inc/Optimum Mastercard PO BOX 5253 Carol Stream, IL 60197-9901	_		Date Claim: 6/6/08. Fifth Third Bank Optimum MasterCard issued by HSBC.				869.73
ACCOUNT NO. 5155-9700-2068-5489			Revolving account opened 9/07	Н		\dashv	809.73
Hsbc Bank Po Box 5253 Carol Stream, IL 60197							1,112.94
ACCOUNT NO. 512734000049 Hsbc Bank Po Box 5253 Carol Stream, IL 60197			Revolving account opened 7/07				200.00
			D-1- Ol-in- 00/5/0000	Н		\dashv	869.00
ACCOUNT NO. 060004629 Konica Minolta Konica Minolta Business Solutions U.S.A, 100 Williams Drive Ramsey, NJ 07446	X		Date Claim: 06/5/2008. Equipment lease				unknown
ACCOUNT NO. 408234	х		Date Claim: 04/30/08. Equipment Lease	H		\dashv	
Konica Minolta Konica Minolta Business Solutions U.S.A, 100 Williams Drive Ramsey, NJ 07446							127.61
Sheet no. 3 of 5 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of th		age)	\$ 14,742.33
			(Use only on last page of the completed Schedule F. Repor the Summary of Schedules, and if applicable, on the S Summary of Certain Liabilities and Relate	als	tica	n ıl	\$

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IN RE Herrera, Florinda Monica

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Debtor(s)

(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

		_ (Continuation Sneet)				
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 1407-IL0973			Date Claim: 05/29/08.	П		П	
	-						
Kroll Kroll Factual Data 5200 Hahns Peak Drive Loveland, CO 80538							1,638.50
A CCOLINE NO			condo association dues			H	
ACCOUNT NO.	4		condo descolation dass				
Lakeside On The Park Condo Association C/O Kovitz Shifrin Nesbit 750 Lake Cook Road, Suite 350 Buffalo Grove, IL 60089-2073							4,669.70
ACCOUNT NO. 1000000465502	х		Date Claim: 05/30/08. For Services rendered if	H		H	
LandSafe Real Estate Closing Services P.O. Box 650530 Dallas, TX 75265	_^		credit reports, appraisal, and flood services to debtor's company. Account is delinquent.				
							182.00
ACCOUNT NO. Inv#1107	x		Date Claim: 03/14/08. For Preparation of corporate Federal Income Tax Return.				
Lopez & CO CPAs & Management Consultants 2702 W Chicago Chicago, IL 60622							1,200.00
ACCOUNT NO. 43-764-766-564-0	\vdash		Date Claim: 05/12/08.	Н		\dashv	.,200.00
Macy's PO BOX 689195 DesMoines, IA 50368-9195							1,074.44
102552	х		Date Claim: 05/28/08. Commercial Line of Credit	H		\dashv	
ACCOUNT NO. 103552 MB Financial 6111 North River Road Rosemont, IL 60018			with mb Financial Ioan#103552 against River North Lending Group., LLC.				
202*4052004 4			Date Claim: 12/03/2007. Insurance paid their				75,686.44
ACCOUNT NO. 202*1053901.1 Pathology Assoc Of Chicago, LTD PO BOX 88487 Chicago, IL 60680-1487			portion of this account. Debtor is responsible for the remaining balance.				
							153.35
Sheet no. 4 of 5 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of th		age	;)	\$ 84,604.43
			(Use only on last page of the completed Schedule F. Report the Summary of Schedules, and if applicable, on the St Summary of Certain Liabilities and Relate	also atis	tica	n il	\$

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

		(Continuation Sheet)				
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 250003974			Open account opened 3/05				
Peoples Engy 130 E Randolph Chicago, IL 60601			Utility expense				40.00
	V		D-1- Ol-i 00/00/00			Н	49.00
ACCOUNT NO. 0094337771 Tiger Direct TigerDirect.Com C/O SYX Services P.O. Box 449001 Miami, FL 33144-9001	X		Date Claim: 06/02/08.				881.20
ACCOUNT NO. 0580410505-0001			Date Claim: 03/04/08, Balance due: \$279.68			\dashv	001.20
Verizon Wireless C/O NCO Financial PO Box 105291 Atlanta, GA 30348							279.68
ACCOUNT NO. 395-037623-2			Date Claim: 06/09/08.				
WAMU PO BOX 2437 Chatsworth, CA 91313-2437							376.85
ACCOUNT NO.							
ACCOUNT NO.							
ACCOUNT NO.							
Sheet no5 of5 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			: (Total of th	-	age	e)	_{\$} 1,586.73
			(Use only on last page of the completed Schedule F. Report the Summary of Schedules, and if applicable, on the St Summary of Certain Liabilities and Relate	als atis	tica	n al	\$ 156,438.81

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IN RE Herrera, Florinda Monica

Debtor(s) (If known)

Case No.

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

NAME AND MAILING ADDRESS, INCLUDING ZIP CODE OF OTHER PARTIES TO LEASE OR CONTRACT	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTERES' STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.
ica Minolta ica Minotla Business Solutions U.S.A, Williams Drive	Lease of 1 DI3510 photocopier; debtor provided persona guarantee of Corporation's lease. NOT ASSUMED.
sey, NJ 07446	

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Case No. _

Debtor(s)

(If known)

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by the debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight-year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR				
Blanca Casas	MB Financial				
18W176 Belair Ct	6111 North River Road				
Darien, IL 60561	Rosemont, IL 60018				
	FOCUS, IV, LLC				
	10523 West Cermak Road, Suite 210				
	Westchester, IL 60154				
	Konica Minolta				
	Konica Minolta Business Solutions U.S.A,				
	100 Williams Drive				
	Ramsey, NJ 07446				
	Konica Minolta				
	Konica Minolta Business Solutions U.S.A,				
	100 Williams Drive				
	Ramsey, NJ 07446				
	Tiger Direct				
	TigerDirect.Com C/O SYX Services				
	P.O. Box 449001				
	Miami, FL 33144-9001				
	First American CREDCO				
	Facredco.Com				
	PO BOX 509019				
	San Diego, CA 92150-9019				
	LandSafe				
	Real Estate Closing Services				
	P.O. Box 650530				
	Dallas, TX 75265				
	Lopez & CO				
	CPAs & Management Consultants				
	2702 W Chicago				
Ricardo Sandoval	Chicago, IL 60622 MB Financial				
10526 W. Cermak Road, Suite 301	6111 North River Road				
Westchester, IL 60154	Rosemont, IL 60018				
	FOCUS, IV, LLC				
	10523 West Cermak Road, Suite 210				
	Westchester, IL 60154				
	Konica Minolta				
	Konica Minolta Business Solutions U.S.A,				
	100 Williams Drive				
	Ramsey, NJ 07446				

Debtor(s)

Case No. _ (If known)

SCHEDULE H - CODEBTORS

(Co.	ntinuation Sheet)
NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
	Konica Minolta Konica Minolta Business Solutions U.S.A, 100 Williams Drive
	Ramsey, NJ 07446 Tiger Direct
	TigerDirect.Com C/O SYX Services P.O. Box 449001 Miami, FL 33144-9001
	First American CREDCO Facredco.Com
	PO BOX 509019 San Diego, CA 92150-9019
	LandSafe Real Estate Closing Services P.O. Box 650530
	Dallas, TX 75265
	CPAs & Management Consultants 2702 W Chicago Chicago, IL 60622
	Cincago, in 60022

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IN RE Herrera, Florinda Monica

Debtor(s)

(If known)

${\bf SCHEDULE\ I-CURRENT\ INCOME\ OF\ INDIVIDUAL\ DEBTOR(S)}$

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on From 22A, 22B, or 22C.

Debtor's Marital Status		DEPENDENTS OF			
Single RELATIONSHIP(S):					AGE(S):
EMPLOYMENT:		DEBTOR		SPOUSE	
Occupation	Mortgage Loa	an Consultant			
Name of Employer	Vision Mortga	age			
How long employed	5 months				
Address of Employer	10526 W. Ceri	mak Road			
	Westchester,	IL 60154			
INCOME: (Estimo	oto of overess or	managed and monthly income at time ages filed)		DERTO	R SPOUSE
		r projected monthly income at time case filed)	.4.1. \	DEBTOI \$ 803.0	
=	-	lary, and commissions (prorate if not paid mon	ithly)		
2. Estimated month	ly overtime			\$	\$
3. SUBTOTAL				\$803.0	<u>0</u> \$
4. LESS PAYROLI					_
a. Payroll taxes a	nd Social Securi	ity		\$153.2	7 \$
b. Insurance					_ \$
c. Union dues					_ \$
d. Other (specify))			\$	_ \$
				\$	\$
5. SUBTOTAL OI	F PAYROLL D	DEDUCTIONS			7 \$
6. TOTAL NET M	IONTHLY TA	KE HOME PAY		\$649.7	<u>3</u> \$
7. Regular income f	from operation of	of business or profession or farm (attach detaile	ed statement)	\$	\$
8. Income from real			,		\$
9. Interest and divid				\$	\$
10. Alimony, maint	enance or suppo	ort payments payable to the debtor for the debto	or's use or		
that of dependents l	listed above			\$	_ \$
11. Social Security	or other govern	ment assistance			
(Specify)				\$	_ \$
				\$	_ \$
12. Pension or retir	ement income			\$	_ \$
13. Other monthly i	income				
(Specify)					_ \$
				\$	_ \$
				\$	_ \$
14. SUBTOTAL C	OF LINES 7 TH	HROUGH 13		\$	\$
15. AVERAGE M)	\$ 649.7		
20,11,220102	01(111111111111111111111111111111111111		,	Ψ	
16. COMBINED A	AVERAGE MC	ONTHLY INCOME: (Combine column totals	from line 15;		
		atal reported on line 15)	,	•	649.73

if there is only one debtor repeat total reported on line 15)

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document: Debtor is seeking hourly employment to supplement her commission based mortgage lending employment.

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IN RE Herrera, Florinda Monica

c. Monthly net income (a. minus b.)

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Debtor(s)

_ Case No. _ (If known)

-3,357.80

SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prora quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the d on Form22A or 22C.		-
Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complet	e a separat	e schedule of
expenditures labeled "Spouse."		
	Φ.	2,100.00
1. Rent or home mortgage payment (include lot rented for mobile home)	\$	2,100.00
a. Are real estate taxes included? Yes No		
b. Is property insurance included? Yes No 2. Utilities:		
	\$	150.00
a. Electricity and heating fuel b. Water and sewer	Ф —	30.00
	Φ —	75.00
c. Telephone	ъ	
d. Other	— • —	
3. Home maintenance (repairs and upkeep)	\$	50.00
4. Food	\$ \$	400.00
5. Clothing	\$ \$	50.00
6. Laundry and dry cleaning	\$	80.00
7. Medical and dental expenses	\$ —	100.00
8. Transportation (not including car payments)	\$ \$	
9. Recreation, clubs and entertainment, newspapers, magazines, etc.	\$ —	
10. Charitable contributions	\$	
11. Insurance (not deducted from wages or included in home mortgage payments)	Ψ	
a. Homeowner's or renter's	\$	60.00
b. Life		
c. Health	\$ —	
d. Auto	\$ — \$	100.00
e. Other		
c. oulci	\$	
12. Taxes (not deducted from wages or included in home mortgage payments)	Ψ	
(Specify)	\$	
	<u>*</u>	
13. Installment payments: (in chapter 11, 12 and 13 cases, do not list payments to be included in the plan)	—	
a. Auto	\$	512.53
b. Other		
	*	
14. Alimony, maintenance, and support paid to others		
15. Payments for support of additional dependents not living at your home	\$	
16. Regular expenses from operation of business, profession, or farm (attach detailed statement)	\$	
17. Other		
	\$	
18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.	\$	4,007.53
19. Describe any increase or decrease in expenditures anticipated to occur within the year following the filing None	of this docu	iment:
20. STATEMENT OF MONTHLY NET INCOME	Φ.	649.73
a. Average monthly income from Line 15 of Schedule Ib. Average monthly expenses from Line 18 above	\$ \$	4,007.53
o. riverage monuny expenses from Line to above	Ψ_	.,5550

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(If known)

IN RE Herrera, Florinda Monica

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Debtor(s)

Case No.

DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 20 sheets, and that they are true and correct to the best of my knowledge, information, and belief. ____ Signature: /s/ Florinda Monica Herrera Date: September 5, 2008 Florinda Monica Herrera Signature: _ Date: (Joint Debtor, if any) [If joint case, both spouses must sign.] DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110) I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342 (b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required by that section. Social Security No. (Required by 11 U.S.C. § 110.) Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social security number of the officer, principal, responsible person, or partner who signs the document. Address Date Signature of Bankruptcy Petition Preparer Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document, unless the bankruptcy petition preparer is not an individual: If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person. A bankruptcy petition preparer's failure to comply with the provision of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156. DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP _____ (the president or other officer or an authorized agent of the corporation or a member or an authorized agent of the partnership) of the __ (corporation or partnership) named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of ______ sheets (total shown on summary page plus 1), and that they are true and correct to the best of my knowledge, information, and belief. __ Signature: _ Date:

Document Page 37 of 47 United States Bankruptcy Court

Northern District of Illinois

IN RE: Case No. Herrera, Florinda Monica Chapter 7 Debtor(s)

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 -25. If the answer to an applicable question is "None," mark the box labeled "None." If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

1. Income from employment or operation of business

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the two years immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

6,100.00 Debtor's approximate YTD 2008 income

12,938.00 Debtor's income in 2007

41,699.00 Debtor's income in 2006: \$41,699.00

2. Income other than from employment or operation of business

State the amount of income received by the debtor other than from employment, trade, profession, operation of the debtor's business during the two years immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

3. Payments to creditors

Complete a. or b., as appropriate, and c.

a. Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

List all gifts or charitable contributions made within one year immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not

8. Losses

List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

9. Payments related to debt counseling or bankruptcy

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under bankruptcy law or preparation of a petition in bankruptcy within one year immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE Attorneys Serving You, LLC 1701 S. First Avenue, Ste. 207 Maywood, IL 60153-2400 **CCSS Of Greater Atlanta**

DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR 6/11/2008

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY 900.00

a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

50.00

Fre-ining counseling		
10. Other transfers		
absolutely or as security within two years imme	nsferred in the ordinary course of the business or the ediately preceding the commencement of this case of the spouses whether or not a joint petition is filed.	se. (Married debtors filing under chapter 12 or
NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR Hilton Grand Vacations CompanyLLC C/O Kahane & Assoc. 1815 Griffin Rd., Ste. 104 Dania Beach, FL 33004 none	DATE July, 2008	DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED Time share interest
Debtor was 2 months behind on time share pa 2008.	yments; Debtor surrendered property and	d executed Quit Claim deed in July,
None b. List all property transferred by the debtor within device of which the debtor is a beneficiary.	n ten years immediately preceding the commence	ment of this case to a self-settled trust or similar
11. Closed financial accounts		
transferred within one year immediately prece certificates of deposit, or other instruments; sha brokerage houses and other financial institution	in the name of the debtor or for the benefit of the ding the commencement of this case. Include of the res and share accounts held in banks, credit unions. (Married debtors filing under chapter 12 or chapter spouses whether or not a joint petition is filed.)	hecking, savings, or other financial accounts, ons, pension funds, cooperatives, associations, napter 13 must include information concerning
NAME AND ADDRESS OF INSTITUTION Bank Of America PO Box 25118 Tampa, FL 33622-5118	TYPE AND NUMBER OF ACCOUNT AND AMOUNT OF FINAL BALANCE Money Market checking - 0028-7250-7771	AMOUNT AND DATE OF SALE OR CLOSING Negative balance of \$11.36; closed March, 2008
12. Safe deposit boxes		
	in which the debtor has or had securities, cash, or ried debtors filing under chapter 12 or chapter 13 led, unless the spouses are separated and a joint p	must include boxes or depositories of either or
13. Setoffs		
None List all setoffs made by any creditor, including a case. (Married debtors filing under chapter 12 of petition is filed, unless the spouses are separated.)	r chapter 13 must include information concerning	
14. Property held for another person		
None List all property owned by another person that t	he debtor holds or controls.	
15. Prior address of debtor		
	tely preceding the commencement of this case, list ent of this case. If a joint petition is filed, report	
ADDRESS Previous address located at 3801 W 56TH Stree Chicago, IL 60629	NAME USED set, Same	DATES OF OCCUPANCY

16. Spouses and Former Spouses

 $^{None} \quad If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, California, C$ Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law.

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law.

None

b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

None

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

18. Nature, location and name of business

None a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within **six years** immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

Westchester, IL 60154

LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/COMPLETE EIN

River North Lending, LLC

EIN ADDRESS 10526 W. Cermak Rd., Ste. 301 NATURE OF BUSINESS BEGINNING AND ENDING DATES

Mortgage Broker 3/20/2004 - 5/20/08

Debtor was 1/3 owner of business; no assets; business closed due to poor economy

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

 $\overline{\mathbf{V}}$

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within six years immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement **only** if the debtor is or has been in business, as defined above, within the six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

19. Books, records and financial statements

None

a. List all bookkeepers and accountants who within the **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

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None b. List all firms or individuals who within the **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

None c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

None d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom a financial statement was issued within the **two years** immediately preceding the commencement of the case by the debtor.

20. Inventories

None a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

None b. List the name and address of the person having possession of the records of each of the two inventories reported in a., above.

21. Current Partners, Officers, Directors and Shareholders

None a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, controls, or holds 5 percent or more of the voting or equity securities of the corporation.

22. Former partners, officers, directors and shareholders

None a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

23. Withdrawals from a partnership or distributions by a corporation

If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

24. Tax Consolidation Group

If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

25. Pension Funds.

If the debtor is not an individual, list the name and federal taxpayer identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within six years immediately preceding the commencement of the case.

[If completed by an individual or individual and spouse]

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date: September 5, 2008	Signature /s/ Florinda Monica Herrera	
	of Debtor	Florinda Monica Herrera
Date:	Signature	
	of Joint Debtor	
	(if any)	
	continuation pages attached	

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. § 152 and 3571.

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IN RE:				Case No.			
Herrera, Florino	da Monica			Chapter 7			
	Debt	or(s)		. –			
	CHAPTER 7 IND	IVIDUAL DEBTOR'S	STATEMENT (F INTEN	TION		
I have filed a s	chedule of assets and liabilities we chedule of executory contracts are the following with respect to the p	nd unexpired leases which inc	ludes personal proper	ty subject to a	an unexpire	ed lease.	
Description of Secured Pro	pperty	Creditor's Name		Property will be Surrendered	Property is claimed as exempt	Property will be redeemed pursuant to 11 U.S.C. § 722	Debt will be reaffirmed pursuant to 11 U.S.C. § 524(c)
2006 Mazda3		Harris N.a.					✓
Single Family F	lome located at 3801 W. 561	Select Portfolio Svcin			Ret	ain *	
	ence - condominium - locate	. .		✓			
Single Family F	lome located at 3801 W. 56	Washington Mutual Ban	k	* D		ain *	1
				* Retain an	d pay purs	suant to orig	inal contract
							Lease will be
							assumed pursuant to 11
Description of Leased Prop	perty	Lessor's Name					U.S.C. § 362(h)(1)(A)
09/05/2008	/s/ Florinda Monica Herre	ra					
Date	Florinda Monica Herrera	De	btor		Joi	nt Debtor (i	f applicable)
I declare under p compensation and and 342 (b); and, bankruptcy petitio	enalty of perjury that: (1) I am have provided the debtor with a (3) if rules or guidelines have be preparers, I have given the debtor, as required by that section	a bankruptcy petition prepar copy of this document and the en promulgated pursuant to for notice of the maximum am	er as defined in 11 Ue notices and informat	J.S.C. § 110; ion required u	(2) I prepunder 11 Unum fee fo	pared this d I.S.C. §§ 110 r services ch	ocument for O(b), 110(h), nargeable by
Printed or Typed No	me and Title, if any, of Bankruptcy Po	ofition Propagar		Social Security	No (Pagui	rad by 11 II S	C 8 110.)
	petition preparer is not an indiv	-		-	_	-	
	n, or partner who signs the docum		y arry), address, arte	social securi	y number	oj ine ogjice	r, principui,
Address							
Signature of Bankru	ptcy Petition Preparer			Date			
Names and Social	Security numbers of all other indi	ividuals who prepared or assis	ted in preparing this d	ocument, unle	ess the ban	kruptcy petit	tion preparer

If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.

A bankruptcy petition preparer's failure to comply with the provision of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.

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IN RE:		Case No.
Herrera, Florinda Monica		Chapter 7
	Debtor(s)	
	VERIFICATION OF CRE	EDITOR MATRIX
		Number of Creditors49
Date: September 5, 2008	/s/ Florinda Monica Herrera	1
	Debtor	
	Joint Debtor	

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Herrera, Florinda Monica 1250 S. Indiana Street, Unit 1308 Chicago, IL 60605

Citi Po Box 6241 Sioux Falls, SD 57117 Florinda Herrera 1250 S Indiana, Apt#1308 Chicago, IL 60605

Attorneys Serving You, LLC 1701 S. 1st Ave., Ste. 207 Maywood, IL 60153-2400

Citi ATTENTION: BANKRUPTCY Po Box 20507

10523 West Cermak Road, Suite 210 Westchester, IL 60154

Kansas City, MO 64915

Harris N.a.

FOCUS, IV, LLC

Amex PO BOX 0001 Los Angeles, CA 90096-0001 **Discover Fin Sycs Llc** Po Box 15316 Wilmington, DE 19850

Po Box 94034 Palatine, IL 60094

Amex

Po Box 297871

Fort Lauderdale, FL 33329

ATTENTION: BANKRUPTCY DEPARTMENT Hilton Grand Vacations Company, LLC

Po Box 3025

New Albany, OH 43054

Discover Fin Sycs Llc

6335 Metro West Blvd., Suite 180

Orlando, FL 32835

Amex **Line Of Credit** PO BOX 0001

Los Angeles, CA 90096-0001

Dish Network Dept. 0063

Palatine, IL 60055

HSBC

HSBC CardServices Inc/Optimum

Mastercard PO BOX 5253

Carol Stream, IL 60197-9901

Amex

C/O BECKET AND LEE

Po Box 3001 Malvern, PA 19355 **Dsnb Macys** 9111 Duke Blvd Mason, OH 45040 **HSBC**

One HSBC Ctr. Buffalo, NY 14203

Bank Of America Mexicana Mastercard

Po Box 15726

Wilmington, DE 19886-5726

Dsnb Macys ATTN: BANKRUPTCY 6356 Corley Rd

Norcross, GA 30071

Hsbc Bank Po Box 5253

Carol Stream, IL 60197

Bank Of America

ATTN: BANKRUPTCY DEPT NC4-105-03-14

Po Box 26012

Greensboro, NC 27420

Emergency Care Physician Svcs

PO BOX 88640

Chicago, IL 60680-8640

Hsbc Bank

ATTN: BANKRUPTCY

Po Box 5213

Carol Stream, IL 60197

Chase

800 Brooksedge Blvd Westerville, OH 43081 **FIA Card Services**

C/O Bank Of America - BK Dept

PO Box 26012

Greenboro, NC 27420

Konica Minolta

Konica Minolta Business Solutions U.S.A

100 Williams Drive Ramsey, NJ 07446

Chase

ATTN: BANKRUPTCY DEPT

Po Box 100018

Kennesaw, GA 30156

First American CREDCO Facredco.Com PO BOX 509019 San Diego, CA 92150-9019 **Konica Minolta**

Konica Minotla Business Solutions U.S.A

100 Williams Drive Ramsey, NJ 07446

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Kroll Kroll Factual Data 5200 Hahns Peak Drive Loveland, CO 80538 Peoples Engy C/O BANKRUPTCY DEPARTMENT 130 E. Randolph Drive Chicago, IL 60602 Washington Mutual Bank
ATTENTION: BANKRUPTCY DEPT. JAX.
2035
7255 Bay Meadows Way
Jacksonville, FL 32256

Lakeside On The Park Condo Association C/O Kovitz Shifrin Nesbit 750 Lake Cook Road, Suite 350 Buffalo Grove, IL 60089-2073 Plaza Associates JAF Station PO Box 2769 New York, NY 10116-2769

LandSafe Real Estate Closing Services P.O. Box 650530 Dallas, TX 75265 Select Portfolio Svcin Po Box 65250 Salt Lake City, UT 84165

Lopez & CO CPAs & Management Consultants 2702 W Chicago Chicago, IL 60622 Select Portfolio Svcin 3815 South West Temple Salt Lake City, UT 84115

Macy's PO BOX 689195 DesMoines, IA 50368-9195 Tiger Direct
TigerDirect.Com C/O SYX Services
P.O. Box 449001
Miami, FL 33144-9001

MB Financial 6111 North River Road Rosemont, IL 60018 Verizon Wireless C/O NCO Financial PO Box 105291 Atlanta, GA 30348

NCO Financial Systems 507 Prudential Rd. Horsham, PA 19044 Wachovia Mortgage, Fsb 4101 Wiseman Blvd # Mc-t San Antonio, TX 78251

Northland Group, Inc. PO Box 390905 Edina, MN 55439 Wachovia Mortgage, Fsb 4101 WISEMAN BLVD Attn: Bankruptcy San Antonio, TX 78251

Pathology Assoc Of Chicago, LTD PO BOX 88487 Chicago, IL 60680-1487 WAMU PO BOX 2437 Chatsworth, CA 91313-2437

Peoples Engy 130 E Randolph Chicago, IL 60601 Washington Mutual Bank 3990 S Babcock St Melbourne, FL 32901

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Northern District of Illinois

111	KE:	Case No.
Herrera, Florinda Monica		Chapter 7
	Debtor(s)	
	DISCLOSURE OF COMPENSATION OF	ATTORNEY FOR DEBTOR
1.	Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the attorney for the above-named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:	
	For legal services, I have agreed to accept	1,800.00
	Prior to the filing of this statement I have received	900.00
	Balance Due	900.00
2.	The source of the compensation paid to me was: Debtor Other (specify):	
3.	The source of compensation to be paid to me is: Debtor Other (specify):	
4.	I have not agreed to share the above-disclosed compensation with any other person un	less they are members and associates of my law firm.
	I have agreed to share the above-disclosed compensation with a person or persons wh together with a list of the names of the people sharing in the compensation, is attached	
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:	
	 a. Analysis of the debtor's financial situation, and rendering advice to the debtor in deter b. Preparation and filing of any petition, schedules, statement of affairs and plan which r c. Representation of the debtor at the meeting of creditors and confirmation hearing, and d. Representation of the debtor in adversary proceedings and other contested bankruptey e. [Other provisions as needed] 	nay be required; any adjourned hearings thereof;
6.	By agreement with the debtor(s), the above disclosed fee does not include the following ser Contested matters and adversaries.	vices:
	CERTIFICATION	

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding. September 5, 2008 /s/ G. Paul McFarling Date Signature of Attorney Attorneys Serving You, LLC Name of Law Firm